

Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents with HIV

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Table 22b. Interactions between Integrase Strand Transfer Inhibitors and Non-Nucleoside Reverse Transcriptase Inhibitors or Protease Inhibitors (Last updated December 18, 2019; last reviewed December 18, 2019) (page 1 of 4)

Recommendations for managing a particular drug interaction may differ depending on whether a new ARV drug is being initiated in a patient on a stable concomitant medication or a new concomitant medication is being initiated in a patient on a stable ARV regimen. The magnitude and significance of drug interactions are difficult to predict when several drugs with competing metabolic pathways are prescribed concomitantly.

ARV Drugs by Drug Class		INSTIs				
		BIC	DTG	EVG/c	RAL	
NNRTIs						
Da	PK Data	⇔ DOR and BIC expected	\leftrightarrow DOR DTG AUC \uparrow 36% and C $_{min}$ \uparrow 27%	↑ DOR expected ↔ EVG	↔ DOR and RAL expected	
	Dose	No dose adjustment needed.	No dose adjustment needed.	No dose adjustment needed.	No dose adjustment needed.	
EFV	PK Data	↓ BIC expected	With DTG 50 mg Once Daily: • DTG AUC ↓ 57% and C _{min} ↓ 75%	↑ or ↓ EVG, COBI, and EFV possible	With RAL 400 mg Twice Daily: • RAL AUC ↓ 36% and C _{min} ↓ 21% With RAL 1,200 mg Once Daily: • ↔ RAL AUC and C _{min}	
	Dose	Do not coadminister.	In Patients Without INSTI Resistance: DTG 50 mg twice daily In Patients With Certain INSTI-Associated Resistancea or Clinically Suspected INSTI Resistance: Consider alternative combination.	Do not coadminister.	No dose adjustment needed.	
ETR	PK Data	↓ BIC expected	ETR 200 mg Twice Daily plus DTG 50 mg Once Daily: • DTG AUC ↓ 71% and C _{min} ↓ 88% ETR 200 mg Twice Daily with (DRV 600 mg plus RTV 100 mg) Twice Daily and DTG 50 mg Once Daily: • DTG AUC ↓ 25% and C _{min} ↓ 37% ETR 200 mg Twice Daily with (LPV 400 mg plus RTV 100 mg) Twice Daily and DTG 50 mg Once Daily: • DTG AUC ↑ 11% and C _{min} ↑ 28%	↑ or ↓ EVG, COBI, and ETR possible	ETR 200 mg Twice Daily plus RAL 400 mg Twice Daily: • ETR C _{min} ↑ 17% • RAL C _{min} ↓ 34%	

Table 22b. Interactions between Integrase Strand Transfer Inhibitors and Non-Nucleoside Reverse Transcriptase Inhibitors or Protease Inhibitors (Last updated December 18, 2019; last reviewed December 18, 2019) (page 2 of 4)

ARV Drugs by Drug Class		INSTIs				
		BIC	DTG	EVG/c	RAL	
NNRTIs, co	ntinued					
ETR	Dose	Do not coadminister.	Do not coadminister ETR and DTG without concurrently administering ATV/r, DRV/r, or LPV/r.	Do not coadminister.	RAL 400 mg twice daily Coadministration with RAL 1,200 mg once daily is not recommended.	
			In Patients Without INSTI Resistance:			
			DTG 50 mg once daily with ETR (concurrently with ATV/r, DRV/r, or LPV/r)			
			In Patients With Certain INSTI-Associated Resistance ^a or Clinically Suspected INSTI Resistance:			
			DTG 50 mg twice daily with ETR (concurrently with ATV/r, DRV/r, or LPV/r)			
NVP	PK Data	↓ BIC expected	With DTG 50 mg Once Daily: • DTG AUC ↓ 19% and C _{min} ↓ 34%	↑ or ↓ EVG, COBI, and NVP possible	No data	
	Dose	Do not coadminister.	No dose adjustment needed.	Do not coadminister.	No dose adjustment needed.	
RPV	PK Data	No data	With DTG 50 mg Once Daily: • \leftrightarrow DTG AUC and C_{min} ↑ 22% • \leftrightarrow RPV AUC and C_{min} ↑ 21%	↑ or ↓ EVG, COBI, and RPV possible	↔ RPV RAL C _{min} ↑ 27%	
	Dose	No dose adjustment needed.	No dose adjustment needed.	Do not coadminister.	No dose adjustment needed.	
Pls						
ATV	PK Data	ATV 400 mg Once Daily plus BIC 75 mg Single Dose: • BIC AUC ↑ 315%	(ATV 400 mg plus DTG 30 mg) Once Daily: • DTG AUC ↑ 91% and C _{min} ↑ 180%	↑ or ↓ EVG, COBI, and ATV possible	No data	
	Dose	Do not coadminister.	No dose adjustment needed.	Do not coadminister.	No dose adjustment needed.	
ATV/c	PK Data	BIC AUC ↑ 306%	No data	Not applicable	No data	
	Dose	Do not coadminister.	No dose adjustment needed.	Do not coadminister two COBI-containing products.	No dose adjustment needed.	

Table 22b. Interactions between Integrase Strand Transfer Inhibitors and Non-Nucleoside Reverse Transcriptase Inhibitors or Protease Inhibitors (Last updated December 18, 2019; last reviewed December 18, 2019) (page 3 of 4)

ARV Drugs by Drug Class		INSTIS					
		BIC	DTG	EVG/c	RAL		
PIs, continu	ed						
ATV/r	PK Data	↑ BIC expected	(ATV 300 mg plus RTV 100 mg) Once Daily plus DTG 30 mg Once Daily:	Not applicable	With Unboosted ATV: • RAL AUC ↑ 72%		
			• DTG AUC ↑ 62% and C _{min} ↑ 121%		With Unboosted ATV and RAL 1,200 mg:		
					• RAL AUC ↑ 67%		
					With (ATV 300 mg plus RTV 100 mg) Once Daily:		
					• RAL AUC ↑ 41%		
	Dose	Do not coadminister.	No dose adjustment needed.	Do not coadminister RTV and COBI.	No dose adjustment needed.		
DRV	PK Data	Not applicable	Not applicable	⇔ DRV or EVG expected	Not applicable		
	Dose	Do not administer DRV without RTV or COBI.	Do not administer DRV without RTV or COBI.	No dose adjustment needed.	Do not administer DRV without RTV or COBI.		
DRV/c	PK	BIC AUC ↑ 74%	DRV/c plus DTG Once Daily:	Not applicable	No data		
	Data		• ↔ DTG, DRV, and COBI				
			DTG 50 mg Once Daily and DRV/r Once Daily Switched to DRV/c:				
			• DTG C _{min} ↑ 100%				
	Dose	No dose adjustment needed.	No dose adjustment needed.	Do not coadminister two COBI-containing products.	No dose adjustment needed.		
DRV/r	PK Data	No data	(DRV 600 mg plus RTV 100 mg) Twice Daily with DTG 30 mg Once Daily: • DTG AUC ↓ 22% and C _{min}	Not applicable	With (DRV 600 mg plus RTV 100 mg) Twice Daily: • RAL AUC ↓ 29% and C _{min} ↑ 38%		
	Dose	No dose adjustment needed.	↓ 38% No dose adjustment needed.	Do not coadminister RTV and COBI.	No dose adjustment needed.		
LPV/r	PK Data	No data	With (LPV 400 mg plus RTV 100 mg) Twice Daily and DTG 30 mg Once Daily:	Not applicable	↓ RAL ↔ LPV/r		
			• ↔ DTG				
	Dose	Consider alternative combination.	No dose adjustment needed.	Do not coadminister RTV and COBI.	No dose adjustment needed.		
TPV/r	PK Data	↓ BIC possible	With (TPV 500 mg plus RTV 200 mg) Twice Daily and DTG 50 mg Once Daily:	Not applicable	With (TPV 500 mg plus RTV 200 mg) Twice Daily and RAL 400 mg Twice Daily:		
			• DTG AUC ↓ 59% and C _{min} ↓ 76%		• RAL AUC ↓ 24% and C _{min} ↓ 55%		

Table 22b. Interactions between Integrase Strand Transfer Inhibitors and Non-Nucleoside Reverse Transcriptase Inhibitors or Protease Inhibitors (Last updated December 18, 2019; last reviewed December 18, 2019) (page 4 of 4)

ARV Drugs by Drug Class		INSTIs					
		BIC	DTG	EVG/c	RAL		
Pls, continued	Pls, continued						
TPV/r	Dose	Do not coadminister.	In Patients Without INSTI Resistance: DTG 50 mg twice daily In Patients With Certain INSTI-Associated Resistance ^a or Clinically Suspected INSTI Resistance: Consider alternative combination.	Do not coadminister RTV and COBI.	RAL 400 mg twice daily Coadministration with RAL 1,200 mg once daily is not recommended.		

^a Refer to DTG product label for details.

Key to Symbols:

↑ = increase

 \leftrightarrow = no change

Key: ARV = antiretroviral; ATV = atazanavir; ATV/c = atazanavir/cobicistat; ATV/r = atazanavir/ritonavir; AUC = area under the curve; BIC = bictegravir; C_{min} = minimum plasma concentration; COBI = cobicistat; CYP = cytochrome P; DOR = doravirine; DRV = darunavir; DRV/c = darunavir/cobicistat; DRV/r = darunavir/ritonavir; DTG = dolutegravir; EFV = efavirenz; ETR = etravirine; EVG = elvitegravir; EVG/c = elvitegravir/cobicistat; INSTI = integrase strand transfer inhibitor; LPV = lopinavir; LPV/r = lopinavir/ritonavir; NNRTI = non-nucleoside reverse transcriptase inhibitor; NVP = nevirapine; PI = protease inhibitor; PK = pharmacokinetic; RAL = raltegravir; RPV = ritonavir; TPV/r = tipranavir/ritonavir